

Office of Emergency Medical Services
Virginia Department of Health

CLINICAL TRAINING RECORD

EMERGENCY MEDICAL TECHNICIAN - TRAINING PROGRAM

STUDENT NAME: _____ SSN: _____

_ ADDRESS: _____

ORGANIZATION/AGENCY: _____

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CLINICAL ROTATIONS: (Identify Hospital or EMS Agency in blank provided)

Hospital Department: _____

Ambulance Rotation: _____

_ Clinical Scenario Option Used: ____ YES ____ NO (See below)

Hospital Department or EMS Station Location	Date	Time	Supervisor's Signature

All students completing either the First Responder Bridge or Emergency Medical Technician Basic Course must attend a minimum of 10 hours of clinical observation. If hospital regulations allow students to observe in such areas as Surgery, Obstetrics, Psychiatry etc., these observations may be included in the 10 hour requirement. Ambulance rotations require a minimum of two incidents involving patient contact which may require more than 10 hours.

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CLINICAL SCENARIO OPTION USAGE:

Location of Scenario Session(s)	Date	Time	EMT Instructor's Signature

INSTRUCTORS ARE REMINDED THAT DOCUMENTATION OF THESE TEN HOURS
MUST BE PROVIDED TO THE OFFICE OF E.M.S. REPRESENTATIVE
AT THE TIME OF THE FINAL STATE WRITTEN EXAMINATION.